

# Work Order ID 69197

Wednesday, May 04, 2011 12:01:22 PM



Page 1

Item ID: D3280-1L08

Accept



Setup Start



Revision ID:

Stop



Item Name: Floor Protector, LH

Start Date: 5/4/2011 Start Qty: 4.00



Cust Item ID:

Required Date: 5/13/2011 Req'd Qty: 4.00



Customer:

Reference:

Run Start



Approvals: Process Plan: CL Date: 11/05/04 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop



Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr								
D3280	Rev E								<u>OK</u>

100		0.00							
	HAND FINISHING THERMOFORMING					<u>4</u>			<u>OK</u>
Thermoform	Memo	0.00							<u>11/05/05</u>
Thermoforming Machine	Cut Blanks								

105		0.00							
	Dry Material					<u>x4</u>			<u>OK</u>
HandThermo	Memo	0.00							<u>11/05/05</u>
Hand Finishing Thermoforming	Dry Sheet as per QSI022 POLYCARBONATE								

Temp: 240°

Time IN: 2:00 am

Time OUT: 7:00 am

11/05/05

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng		Sign & Date			

**NOTE:** Date & initial all entries

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Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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110

0.00



THERMOFORMING MACHINE

Thermoform

Memo

0.00

Thermoforming Machine

Thermoform as per Dwg. D3280 and Folio FTA 011

Dwg. Rev. EFolio Rev. C

x 4

JL  
11/05/05

120

0.00



QC2- Inspect parts off machine FAI/FAIB

QC

Memo

0.00

Quality Control

x 4

JL  
11/05/05

130

0.00



HAND FINISHING THERMOFORMING

Thermoform

Memo

0.00

Thermoforming Machine

Trim to Finished Dimensions

x 4

JL  
11/05/06

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 69197**

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Item Name: Floor Protector, LH

Start Date: 5/4/2011 Start Qty: 4.00

Cust Item ID:

Required Date: 5/13/2011 Req'd Qty: 4.00

Customer:




Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140  QC Quality Control	QC2- Inspect parts off machine FAI/FAIB  Memo	0.00  0.00				x 4			Sh 11/05/09
150  QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo	0.00  0.00				(x4)			
160  Packaging Packaging	Packaging  Memo	0.00  0.00				1/5/11			Sh

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng		Sign & Date			

**NOTE:** Date & initial all entries

**Work Order ID 69197**

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Item ID: D3280-1L08

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Revision ID:

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Item Name: Floor Protector, LH

Start Date: 5/4/2011 Start Qty: 4.00

Cust Item ID:

Required Date: 5/13/2011 Req'd Qty: 4.00

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop

Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

170

QC21- Final Inspection - Work Order Release

0.00



QC

Memo

0.00

Quality Control

n/5/11 DJ

ME

11-0540

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng		Sign & Date			

**NOTE:** Date & initial all entries



# Picklist Print

Wednesday, May 04, 2011 12:01:18 PM

Page 1

Work Order ID: 69197



Parent Item: D3280-1L08



Parent Item Name: Floor Protector, LH

Start Date: 5/4/2011

Required Date: 5/13/2011

Start Qty: 4.00

Required Qty: 4.00

Comments: IPP Rev. C Added colour cde to D3280-1 11/03/03 DL

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.118-90318-08		Purchased	No			100	sf	2,220.704	4.333	18.24421			

Lexan Sheet

Location

Loc Qty

Loc Code

therm

2220.70472

2220.70472

113127

18.24421 sq ft

11/05/08

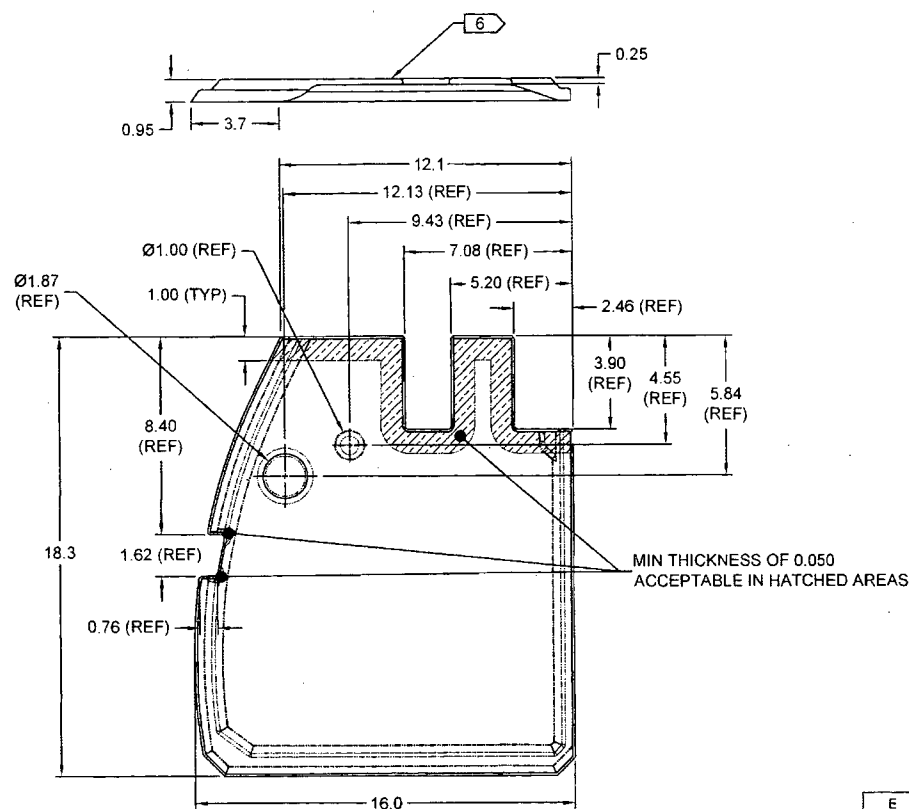
W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng		Sign & Date			

**NOTE:** Date & initial all entries



**D3280-1 FLOOR PROTECTOR**

**D3280-1 NOTES:**

- 1) MATERIAL: -1L02 = LEXAN F6006, BLACK No. 701, 0.093" THICK (MLEXS.093-F6006-02)  
-1L08 = LEXAN 90318 (PROTECT-A-GLAZE), 0.118 THICK, 112-CLEAR (MLEXS.118-90318-08)
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3280-1Lxx" AND B/N PER QSI 044 6.4
- 7) WEIGHT: D3280-1L02 = 0.94 lb D3280-1L08 = 1.13 lb
- 8) THERMOFORM WITH MOLD D3280-1T1 PER DART QSI 022; TRIM AS SHOWN  
MINIMUM THICKNESS AFTER FORMING: 0.070" EXCEPT WHERE INDICATED



11/05/04  
W10: 69197

**RELEASED**  
2011-03-02  
MD

REV.	DESCRIPTION	BY	DATE
E	REVISE NOTES (ZN A8-1, A8-2)	RF	11.03.01
D	THICKNESS 0.093 WAS 0.125, MIN. THICKNESS 0.070 WAS 0.080, P/N & B/N ID WITH VIBRATING STYLUS (ZN A7-1, A7-2); CORRECT WEIGHTS (ZN A8-1, A8-2); HOLE SIZE Ø1.88 WAS Ø0.211 (ZN C7-1)	PH	08.03.28
C	UPDATE DIMS TO MATCH PARTS; COLOUR 701 WAS 700; GENERAL UPDATE	LE	07.10.12
B	NOW LEXAN; DIMS AS MANUFACTURED	CP	05.11.25
A	NEW ISSUE	CP	04.05.03
DESIGN	RF	<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA  DRAWING NO. D3280 TITLE FLOOR PROTECTOR SCALE NTS  COPYRIGHT © 2004 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	
DRAWN	RF		
CHECKED	RF		
MFG. APPR.	RF		
APPROVED	RF		
DE APPR.	RF		
DATE	11.03.01		

W/O:		WORK ORDER CHANGES						
DATE	STEP	PROCEDURE CHANGE		By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

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NCR:		WORK ORDER NON-CONFORMANCE (NCR)							
DATE	STEP	Description of NC Section A	Corrective Action		Section B		Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date				

**NOTE:** Date & initial all entries

<b>DART AEROSPACE LTD</b>		<b>Work Order:</b>	69197
<b>Description:</b> R22 Floor Protector, LH		<b>Part Number:</b>	D3280-1
<b>Inspection Dwg:</b> D3280 <b>Rev:</b> E		<b>Page 1 of 1</b>	

**FIRST ARTICLE INSPECTION CHECKLIST**  
**THERMOFORMING SECTION**

Description	Accept	Reject	Method of Inspection	Comments
Inside Radii less than 0.1875"	✓			
Shape Definition	✓			
Texture Retention	✓			
Material imperfections such as bumps, cracks, voids, scratching	✓			

<b>Measured by:</b>	DL	<b>Date:</b>	11/05/05
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**TRIMMING SECTION**

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
18.3	+/-0.100	18.25"	✓		FLEX RULE TH-2	
16.0	+/-0.100	15.9"	✓		FLEX RULE TH-2	
12.1	+/-0.100	12.0"	✓		FLEX RULE TH-2	
0.95	+/-0.030	0.979"	✓		VERN DL-02	
0.25	+/-0.030	0.275"	✓		VERN DL-02	
0.070	Min	0.105"	✓		CAL TH-DT	
0.050	Min	0.063"	✓		CAL TH-DT	

<b>Measured by:</b>	DL	<b>Date:</b>	11/05/09
<b>Audited by:</b>	S	<b>Date:</b>	11/05/09
<b>Preliminary Approval:</b>		<b>Date:</b>	

Rev	Date	Change	Revised by	Approved
A	08.01.16	New Issue	KJ/DL	
B	08.04.16	Dimensions updated per Dwg Rev D	KJ/DL	
C	11.04.28	Dwg Rev updated	KJ	